

REQUEST AVAILABLE COPY

ISSUE SLIP STAPLE AREA (for additional cross references).

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	3m		11/11/01
O.I.P.E. CLASSIFIER	10		11/11/01
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	DM	72223	8/11/00 6/28/00

INDEX OF CLAIMS

✓	Rejected	N	Non-elected
=	Allowed	I	Interference
—	(Through numeral)... Canceled	A	Appeal
÷ Restricted	O	Objected

Claim	Date
1	Final
2	Original
3	✓
4	✓
5	✓
6	✓
7	✓
8	✓
9	✓
10	✓
11	✓
12	✓
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here